## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	3-8-1
RESPONSE FORMALITY REVIEW		, , ,	

## INDEX OF CLAIMS

	Rejected	
_	(Through numeral) Canceled  Restricted	Appeal Objected

Claim Date	Claim Date	Claim	Date
Claim Date			
Final Miles	Final Original	Final	
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1 N N	53	103	
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	55	105	
		106	<del>                                      </del>
	56	107	
	57	108	<del>                                     </del>
811111		109	<del>{-}-}-</del>
9 1 1 1 2 2	59	110	<del>┡╸┨╺╏═╏═╏</del> ═╋ <del>╒</del> ┼┼═┤
10 1 1 1 0 1 1 =	60	111	╂ <del>╸┤╶┨┈╏┈╏┈</del> ┼┈┤
11 NNON=	61	112	<del>╂╶╏═╏╌╏╌╏╌╏╌</del> ┼╌┤
12 V V =	62	113	<del>╿┈╎╾╎╾╏╾╏╸╏╸</del> ┼╾┼╾┼
12 J V V = 13 J V V =	63		<del>╂╾╏╌┞╌╏┈╏╸╏╸╏╸</del> ┦
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15 N N N N N N	65	116	<del>┤╸┧┈┞╺╂╸╏</del>
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17 4 7 7 10 7 5	67	118	<del>┦═╅╼╏╶╏═╏┈╏</del>
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20 11 1	70	120	<del></del>
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22	72	122	<del>4-1-1-1-1-1-1-1</del>
Na 1	73	123	<del></del>
24 1 1	74	124	<del>┤╺</del> ╁╌╏╌┞╼╂╼╂╼╂╼┦
26 7	75	125	<del>┺╌╎╶╬╌╎╶┾═╏</del> ╌╡
[ 26 ]   J   <del>25</del>	76	126	<del>▗</del> ╆┈┞┈┞┈╃┈╂═╂┈╂═╉╌┦
28	77	127	<del>┧╸╽╶╏╸╏╶╏╸╏</del>
28	78	128	<del>┦╸╎╶╎╸╎╸</del> ┤╾┤╌┤
29	79	129	<del>┪╸╏┈╏╸╏┈╏╸╏</del>
30	80	130	<del>┩╼╏┈╏╼╏┈╏╍╏╸</del> ╏
31	81	131	<del>╶╏╶╏╶╏</del> ╌╏╼╂┈╏╼╂┈
32	82	132	<del>╇┋┋</del>
33	83	133	<del>╺┡</del>
34	84	134	<del>╃╄╂╄╂</del> ╃╃
35	85	135	<del>╶╏┈╏┈╏┈╏┈╏</del> ╌┦
36	86	136	<del>╶╏╸╏┈╏┈╏┈╏</del> ╌┼╌┼╌┤
37	87	137	<del>╎╸┞╸┞╸┞╸┞╸┞╸</del> ┤
38	88	138	<del>╶┧╶╏</del> ╌╂╾╂╼╂╼╂╼┼═┼═┤
39	89	139	<del>┈┧┈┧┈╏┈╏┈╏┈╏</del>
40	90	140	<del>╶┤╶╏</del> ╌╂╌╂╌╂╌╂╌╂
	91	141	<del></del> _
42	92	142	
143	93	143	<del></del>
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1 45	95	145	<del>┈┤┈┤┈┤┈┤┈┤╸</del>
. 46	96	146	<del>┪</del>
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48	98	148	┵┵
49	99	149	╼╁╌╂╌╂╌╂╌╂╌╂╌
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If more than 150 claims or 10 actions staple additional sheet here

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